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APPLICANTS

Viacheslav Ivanovych Adamchuk, Lincoln, NE;
 Andrey Valeryevich Skotnikov, Cedar Falls, IA;
 Justin Douglas Speichinger, Malmo, NE;

** CONTINUING DATA ***** NO_{OD}

** FOREIGN APPLICATIONS ***** NO_{OD}

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Octavia Davis</i> <i>OD</i> Examiner's Signature Initials	STATE OR COUNTRY NE	SHEETS DRAWING 1	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
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ADDRESS
 30689
 DEERE & COMPANY
 ONE JOHN DEERE PLACE
 MOLINE , IL
 61265

TITLE
 Instrumented deep tillage implement

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